

## Unlocking the Answers to Correctly Completing the OASIS

Questions MO300 to MO410



### (MO300) Current Residence:


- ☐ 1- Patient's owned or rented residence (house, apartment, or mobile home owned or rented by patient/couple/significant other)
- ☐ 2- Family member's residence
- ☐ 3- Boarding home or rented room
- ☐ 4- Board and care or assisted living facility
- ☐ 5- Other (specify): \_\_\_\_\_






### (MO340) Patient Lives With:

- ☐ 1- Lives alone
- ☐ 2-With spouse or significant other
- ☐ 3-With other family member
- ☐ 4-With a friend
- ☐ 5-With paid help (other than home care agency staff)
- ☐ 6-With other than above



### My patient lives in her own room in an Assisted Living Facility. How should “*Patient lives with...*” be reported?




- ◆ How should we respond to MO340 for patients living in an ALF?
  - Rules for licensing ALFs vary from State to State, and the actual physical structural arrangements vary from one facility to another, so the answer must be selected that is most appropriate for the individual situation. This item simply asks who the patient lives with, not about the type of assistance that the patient receives. For example: a patient living in his/her own room would be response #1, Lives alone, while a patient sharing a room or studio apartment with someone would be response #2 (With spouse or significant other) or #4 (With a friend).




### (MO350) Assisting Person(s) Other than Home Care Agency Staff

(Mark all that apply.)


- ☐ 1-Relatives, friends, or neighbors living outside the home
- ☐ 2-Person residing in the home (EXCLUDING paid help)
- ☐ 3-Paid help
- ☐ 4- None of the above (go to MO390)
- ☐ UK- Unknown (go




### Is Meals-On-Wheels considered assistance for MO350?



- ◆ MO350 is asking the clinician to identify assisting person(s) other than homecare agency staff. Response 3, Paid help, includes all individuals who are paid to provide assistance to the patient, whether paid by the patient, family or a specific program. Meals-On-Wheels is a community-based service that assists the homebound by delivering meals and would be included in responding to MO350.





## Two-Day OASIS Training




(MO360) Primary caregiver taking lead responsibility for providing or managing the patient's care, providing the most frequent assistance, etc. (other than home care agency staff)

- ☐ 0-No one person (go to MO390)
- ☐ 1-Spouse or significant other
- ☐ 2-Daughter or son
- ☐ 3-Other family member
- ☐ 4-Friend or neighbor or community or church member
- ☐ 5-Paid help
- ☐ UK- Unknown (go to MO390)



How should the item be answered if one person takes the lead responsibility, but another individual helps out *most frequently*?




- ◆ The clinician should assess further to determine whether one of these individuals should be designated as the primary caregiver or whether response 0 (No one person) is the most appropriate description of the situation.

## Two-Day OASIS Training



(MO370) How Often does the patient receive assistance from the primary caregiver?

- ☐ 1-Several times during the day and night
- ☐ 2-Several times during day
- ☐ 3-Once daily
- ☐ 4-Three or more times per week
- ☐ 5-One to two times per week
- ☐ 6-Less often than weekly
- ☐ UK- Unknown



## Assessment Strategies for MO370

- ♦ Ask, in various ways how often the primary caregiver provides various types of assistance (e.g. “How often does your daughter come by? Does she go shopping for you every week? When she is here, does she do the laundry?”). As you proceed through the assessment (particularly the ADLs and IADLs), several opportunities arise to learn details of the help the patient receives.



## (MO380) Type of Primary Caregiver Assistance: *(Mark all that apply)*

- ☐ 1-ADL assistance (e.g. bathing, dressing, toileting, bowel/bladder, eating/feeding)
- ☐ 2-IADL assistance (e.g. meds, meals, housekeeping, laundry, telephone, shopping, finances)
- ☐ 3-Environmental support (housing, home maintenance)
- ☐ 4-Psychosocial support (socialization, companionship, recreation)
- ☐ 5-Advocates or facilitates patient's participation in appropriate medical care
- ☐ 6-Financial agent, power of attorney, or conservator of finance
- ☐ 7-Health care agent, conservator of person, or medical power of attorney
- ☐ 8-UK Unknown

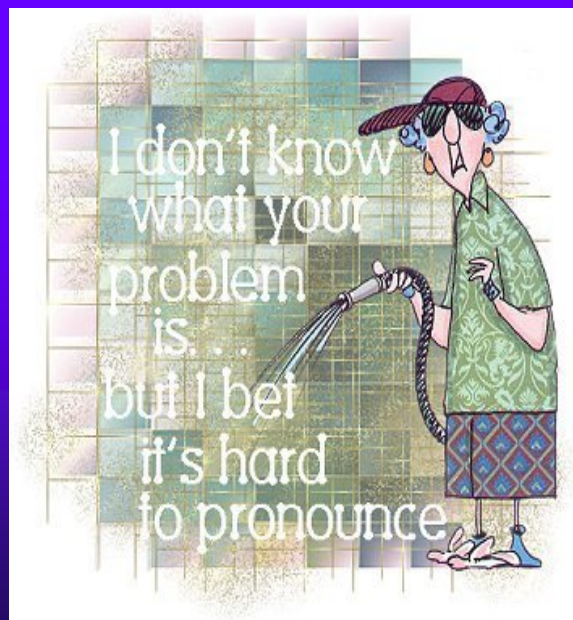





## Response-Specific Instructions for MO380





- ◆ Response #3: Includes home repair and upkeep, mowing lawn, shoveling snow, and painting.
- ◆ Response #4: Includes frequent visits or phone calls, going with patient for outings, church services, other events.
- ◆ Response #5: Takes patient to medical appointments, follows up with filling prescriptions or making subsequent appointments, etc.
- ◆ Response #6 and 7: Legal arrangements that exist for finances or health care.
- ◆ At discharge, omit “UK-Unknown.”






### (MO390) Vision with corrective lenses if the patient usually wears them:

- ❑ 0-Normal vision: sees adequately in most situations, can see medication labels, newsprint
- ❑ 1-Partially impaired: cannot see medication labels or newsprint, but can see obstacles in path, and the surrounding layout; can count fingers at arm's length
- ❑ 2-Severely impaired: cannot locate objects without hearing or touching them or patient non-responsive



### Response-Specific Instructions: MO 390



- ◆ A magnifying glass (as might be used to read newsprint) is not an example of corrective lenses.
- ◆ Reading glasses (including “grocery store” reading glasses) are considered to be corrective lenses.
- ◆ “Nonresponsive” means that the patient is not able to respond.



## Two-Day OASIS Training




### (MO400) Hearing and Ability to Understand Spoken Language

(with hearing aids if the patient usually uses them)

- ❑ 0-No observable impairment. Able to hear and understand complex or detailed instructions and extended or abstract conversation.
- ❑ 1-With minimal difficulty, able to hear and understand most multi-step instructions and ordinary conversation. May need occasional repetition, extra time, or louder voice.
- ❑ 2-Has moderate difficulty hearing and understanding simple, one-step instructions and brief conversation; needs frequent prompting or assistance.
- ❑ 3-Has severe difficulty hearing and understanding simple greetings and short comments. Requires multiple repetitions, restatements, demonstrations, or additional time.
- ❑ 4-Unable to hear and understand familiar words or common expressions consistently, or patient non-responsive.





MO400: Is it correct that both auditory and receptive language functions are included in responding to this item? Therefore a deaf patient who processes spoken language effectively using lip reading strategies is scored at response level 4 (unable to hear and understand) because the item measures the combination of BOTH hearing and comprehension?

- ◆ Yes, MO400 does include assessment of both hearing AND understanding spoken language. A patient unable to hear (even with the use of hearing aids if the patient usually uses them) would be scored at response level #4.

## Two-Day OASIS Training

### (MO410) Speech and Oral (Verbal) Expression of Language (in patient's own language):

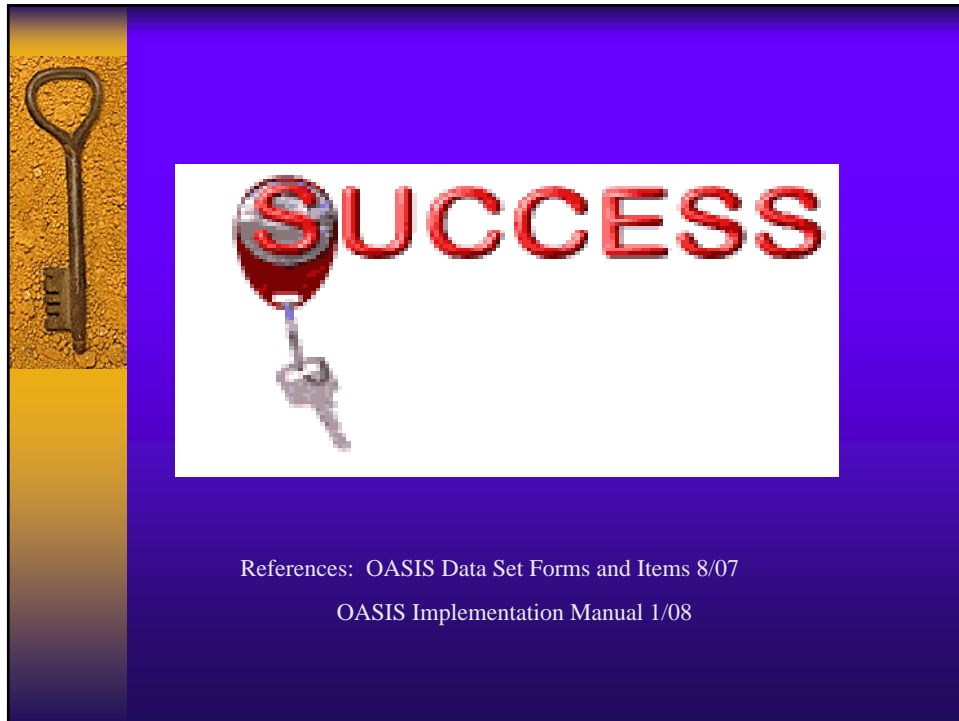


- ❑ 0-Expresses complete ideas, feelings, and needs clearly, completely, and easily in all situations with no observable impairment.
- ❑ 1-Minimal difficulty in expressing ideas and needs (may take extra time; makes occasional errors in word choice, grammar or speech intelligibility; needs minimal prompting or assistance).
- ❑ 2-Expresses simple ideas or needs with moderate difficulty (needs prompting or assistance, errors in word choice, organization or speech intelligibility). Speaks in phrases or short sentences.
- ❑ 3-Has severe difficulty expressing basic ideas or needs and requires maximal assistance or guessing by listener. Speech limited to single words or short phrases.
- ❑ 4-Unable to express basic needs even with maximal prompting or assistance but is not comatose or unresponsive (e.g. speech is nonsensical or unintelligible).
- ❑ 5-Patient non-responsive or unable to speak.

MO410: Can this item be answered if a patient is trained in esophageal speaking or uses an electrolarynx?

- ◆ Augmented speech (through the use of esophageal speech or an electrolarynx) is considered oral/verbal expression of language.

## Two-Day OASIS Training



The slide has a blue gradient background. On the left, there is a vertical yellow bar with a textured, sandy appearance. A large, dark metal key is positioned vertically within this bar. To the right of the key, the word "SUCCESS" is written in large, red, 3D block letters. The letter "S" is integrated with the head of a smaller, silver key that is pointing downwards. Below the graphic, the following references are listed:

References: OASIS Data Set Forms and Items 8/07  
OASIS Implementation Manual 1/08